SEPA POTENTIAL HAZARI	VI	TX4383		
NOTE: This form is completed for each potential hazardou submitted on this form is based on available records and mand on-eite inspections.  REVIEWED	The second name of the latest na	With the same of t	Acceptance of the Control of the Con	
GENERAL INSTRUCTIONS: Complete Sections I and III the Assessment). File this form in the Regional Hazardous Wa Agency; Site Tracking System; Hazardous Waste Enforcem	hrough X as completed by the Log File and su ent Task Force (EN-	tely as possible bmit a copy to: 335); 401 M St.,	before Sect U.S. Enviro SW; Washi	nion II (Preliminary commental Protection ington, DC 20460.
	E IDENTIFICATION			
HARRISON JET GUNS	1616 McGo	other identifier) Wen		
Houston 7x0005928635	D. STATE	77002	Harri	S NAME
o. OWNER/OPERATOR (I Anown)  1. NAME Mr. Ted Harrison, Plant MgrKe Mr. P.G. Harrison, PresHousto	nnedale, TX on, TX		(817)	478-9216 652-4894
H. TYPE OF OWNERSHIP  1. FEDERAL 2. STATE 3. COUNTY 4.	MUNICIPAL XIS.	PRIVATE 5		032-1037
n. SITE DESCRIPTION Administrative/Marketing manufactures and distributes explosively wells. See TX 4391	e charges for	Kennedale, perforatin	TX base	d firm that ining of
Wapora File "G"	e(c.)			K. DATE IDENTIFIED (ma., day, & yr.)
- PRINCIPAL STATE CONTACT I. NAME Mr. Milton McDonald, B.A.T.F., Houston				226-5481
II. PRELIMINARY ASSE	SSMENT (complete t	his section last)		
A. APPARENT SERIOUSNESS OF PROBLEM  1. HIGH 2. MEDIUM 3. LOW X4	NONE 5.	JNKNOWN		
B. RECOMMENDATION  [X] I. NO ACTION NEEDED (no hazard)	Z. IMMED	DIATE SITE INSPE	CTION NEE	DED
. TENTATIVELY SCHEDULED FOR	b. WILL	BE PERFORMED	9 8Y	
b. WILL BE PERFORMED BY:	_ 4. SITE	NSPECTION NEE	DED (low pri	lori(y)
This report updates EPA form T2070-2 d	dated Sept. 18	, 1980.		
Bill Carrothers		)742-4522		Jan. 28, 1981
	TE INFORMATION			
A. SITE STATUS  1. ACTIVE (Those industrial or municipal sites which are being used for weste treatment, storade, or disposal as a continuing basis, even if intraquently.)	Those sites in no regular or c	(specify): Not has include each is ontinuing use of it	a hazar ncidenta like ne site for w	dous waste site. "midmight dumping" where eate disposal has occurred.
S. IS GENERATOR ON SITE!	y generator's lour-digi	t SIC Code):		
Approx. 2  D. IF APPARENT SER	(neec.)	12 LONGIS	17" W	minsec.)
E. ARE THERE BUILDINGS ON THE SITE!  1. NO X 2. YES (apacity): Office buil	lding, equipme			

T2070-2 (10-79)

Continue On Reverse

Indi	cate the major sit	activity/las)		aila c	relating to each ac	_	OF SITE ACTIVIT	im th		date hove		
×		1x1				×1			- x			
7	A. TRANSPOR	TER		B. ST	TORER		C. TREATE	R			0. 0	ISPOSER
	RAIL		I. PILE			_	FILTRATION		_	1. LANDFI	_	
-	. 3419		DRUMS	_	MPOUNDMENT	2. INCINERATION 2. VOLUME REDUCTION 4. RECYCLING/RECOVERY		-	2. LANDFARM 2. OPEN DUMP			
-	BARGE							-				
	4. TRUCK		S. TANK, ABOVE GROUND			B. CHEM./ PHYS. TREATMENT		-	S. MIDNIGHT DUMPING			
_	OTHER (apecify):		6. OTHER (specify):			. BIOLOGICAL TREATMENT		_	4. INCINERATION			
			- Commence			7. WASTE OIL REPROCESSING						
	SPECIEV DETAILS	OF SITE ACTIVE	TIFE AS		tes are manu		SOLVENT RECOV					
	ASTE CHARACTE	2 LIQUID		. soL	. WASTE RELATE	Luo	GE 🗀 L	_	Nor			
	6. TOXIC	7. REACTIVE	-	. IGN	The state of the s		MABLE	нідн	.,			
G	10. OTHER (specif	7. REACTIVE	<u>-</u>	. INE	The state of the s	LAM	MABLE	нідн			_	
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C. N	10. OTHER (specification)  WASTE CATEGORIE Are records of wast  / A  Estimate the amo  a. SLUDGE	7. REACTIVE  7): N/A  5. evaluable? Specify un  5. OIL	pecify ite	eeure	uch as menifests, in	gory	onies, etc. below.  ; mark 'X' to indi	cate	which w	estos are p		I. OTHER
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CX C: N 2. N N	10. OTHER (specification)  ASTE CATEGORIE Are records of west  /A  Estimate the amo  a. SLUDGE  UNIT  ONE  T OF MEASURE  11. FAINT.  PIGMENTS  21. METALS  31. POTH	T. REACTIVE  N/A  See evaliable? See to the control of the control	pecify ite	AMO NO	uch as menifests, into	gory AMC N	maste	Cate	which w	EASURE STOR	AM N	I. OTHER OUNT IONE IT OF MEASURE
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Continued From Page 2 V. WASTE RELATED INFORMATION (continued)
3. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hexard). None 4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE. VI. HAZARD DESCRIPTION A. TYPE OF HAZARD . NO HAZARD Z. HUMAN HEALTH NON-WORKER A. WORKER INJURY S. OF WATER SUPPLY . CONTAMINATION OF GROUND WATER OF SURFACE WATER PLORA/FAUNA 10. FISH KILL 11. CONTAMINATION 12. NOTICEABLE ODORS 13. CONTAMINATION OF SOIL 14. PROPERTY DAMAGE 15. FIRE OR EXPLOSION 16. SPILLS/LEAKING CONTAINERS/ 17. SEWER, STORM IS. EROSION PROBLEMS 19. INADEQUATE SECURITY 20. INCOMPATIBLE WASTES 21. MIDNIGHT DUMPING 22. OTHER (specify)

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£ 22 .

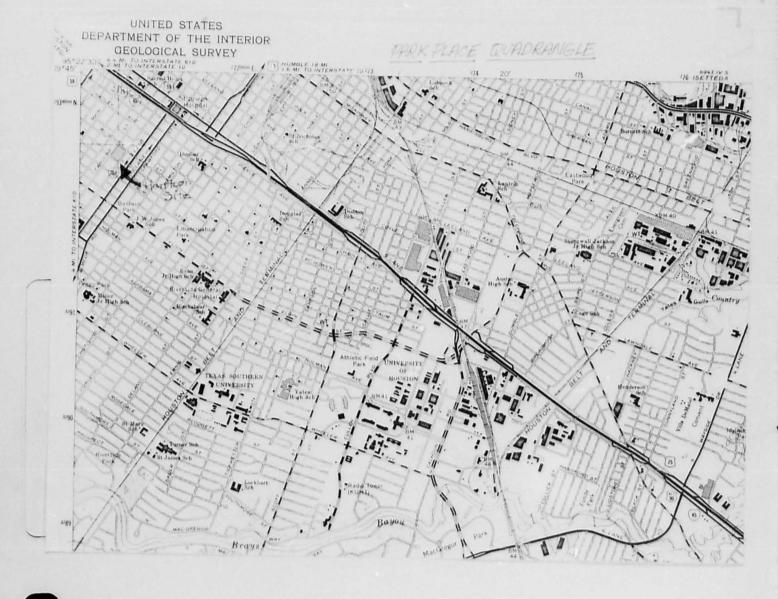
PAGE 3 OF 4

Continue On Reverse

INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.  1. NPOES PERMIT 2. SPCC PLAN 3. STATE PERMIT (specify): 4. AIR PERMITS 3. LOCAL PERMIT 4. A.CRA TRANSPORTER 7. RCRA STORER 5. RCRA TREATER 5. RCRA TRANSPORTER WID. OTHER (specify): BATF License  10. OTHER (specify): BATF License  11. YES 2. NO 3. UNKNOWN  12. NO 3. UNKNOWN  13. WITH RESPECT TO (flat regulation name & number):  WIII. PAST REGULATORY ACTIONS  14. NONE 5. YES (complete flowe 1, 2, 3, & 4 below)  15. TYPE OF ACTIVITY 2. ACTION (mon. der. & Tr.) (EPA/ State)  16. A. NONE 5. YES (complete flowe 1, 2, 3, & 4 below)  17. TYPE OF ACTIVITY 2. ACTION (mon. der. & Tr.) (EPA/ State)  18. YES (complete flowe 1, 2, 3, & 4 below)  28. YES (complete flowe 1, 2, 3, & 4 below)  29. YES (complete flowe 1, 2, 3, & 4 below)  20. A. NONE 5. YES (complete flowe 1, 2, 3, & 4 below)  20. A. NONE 5. YES (complete flowe 1, 2, 3, & 4 below)  30. ALL YES (COMPLETE STATE STA			VII. PERMIT INFORMATION					
4. AIR PERMITS  5. LOCAL PERMIT  6. ACRA TRANSPORTER  7. RCRA STORER  7. RCRA STORER  8. ACRA TRANSPORTER  9. RCRA DISPOSER  10. OTHER (specify): BATF License  11. VES  12. NO  13. UNKHOWN  14. NONE  15. VES (summarize below)  16. TYPE OF ACTIVITY  17. ACTION  17. TYPE OF ACTIVITY  17. ACTION  18. VES (complete items 1, 2, 3, b. 4 delow)  18. VES (complete items 1, 2, 3, b. 4 delow)  19. A. NONE  10. TYPE OF ACTIVITY  10. ACTIVITY  11. TYPE OF ACTIVITY  12. ACTION  13. PERFORMED  14. DESCRIPTION  15. PERFORMED  16. PERFORMED  17. TYPE OF ACTIVITY  17. ACTION  18. PERFORMED  18. PERFORMED  19. ACTIVITY	NDICATE ALL APPLI							
4. AIR PERMITS  5. LOCAL PERMIT  6. ACRA TRANSPORTER  7. RCRA STORER  6. RCRA TREATER  7. RCRA STORER  7. VIII. PAST REGULATORY ACTIONS  7. NONE  7. RCRA STORER  7. RCRA S								
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IN COMPLIANCET  1. YES  2. NO  3. UNKNOWN  4. WITH RESPECT TO (list regulation name & number):  VIII. PAST REGULATORY ACTIONS  A. NONE  3. YES (summarize below)  IX. INSPECTION ACTIVITY (past or on-going)  A. HONE  3. YES (complete items 1,2,1, & 4 below)  1. TYPE OF ACTIVITY  A. NONE  5. YES (complete items 1, 2, 1, & 4 below)  X. REMEDIAL ACTIVITY (past or on-going)  A. NONE  5. YES (complete items 1, 2, 1, & 4 below)  1. TYPE OF ACTIVITY  PAST ACTION  P	7. RCRA STORER	S. ACHA TREATER	S. RCRA DISPOSER					
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1. TYPE OF ACTIVITY  2. DATE OF PAST ACTION (mo., day, b.yr.)  X. REMEDIAL ACTIVITY (past or on-going)  X. REMEDIAL ACTIVITY (past or on-going)  A. NONE  B. YES (complete items 1, 2, 3, b. 4 below)  1. TYPE OF ACTIVITY  PAST ACTION (mo., day, b.yr.)  (EPA/State)  4. DESCRIPTION		TAL INST S	ATTAIN BELLITITITITITITITITITITITITITITITITITITI	W.A.W.				
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A. NONE S. YES (complete items 1, 2, 3, & 4 below)  1. DATE OF ACTIVITY  PAST ACTION (mo. Jer, & Fr.)  (EPA/State)  A. DESCRIPTION								
A. NONE S. YES (complete items 1, 2, 3, & 4 below)  1. DATE OF ACTIVITY  PAST ACTION (mo. Jer, & Fr.)  (EPA/State)  A. DESCRIPTION								
A. NONE S. YES (complete items 1, 2, 3, & 4 below)  1. DATE OF ACTIVITY  PAST ACTION (mo. Jer, & Fr.)  (EPA/State)  A. DESCRIPTION								
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1. TYPE OF ACTIVITY PAST ACTION (MM. MP, & Th.) (EPA/Stee) 4. DESCRIPTION	<b>—</b>	min	* * * * * * * * * * * * * * * * * * * *					
1. TYPE OF ACTIVITY PAST ACTION (BD. Jay, & Th.) (EPA/Size) 4. DESCRIPTION	A. NOME							
	I. TYPE OF ACTIV	HTY PAST ACTION		4. DESCRIPTION				
OTF: Based on the information in Sections III through X fill out the Preliminary Assessment (Section II)		(mo. day, & yr.)	(EPA/State)					
OTF: Based on the information in Sections III through X fill out the Preliminary Assessment (Section II)								
OTF: Based on the information in Sections III through X fill out the Preliminary Assessment (Section II)			-					
OTF: Based on the information in Sections III through X fill out the Preliminary Assessment (Section II)								
OTF: Based on the information in Sections III through X. fill out the Preliminary Assessment (Section II)				Contract of the second				
OTF: Based on the information in Sections III through X. fill out the Preliminary Assessment (Section II)								
DTF: Based on the information in Sections III through X. fill out the Preliminary Assessment (Section II)								
	OTF: Based on the	information in Sections I	If through X, fill out the	Preliminary Assessment (Section II)				
	information o		rm.					
information on the first page of this form.								

See EPA form T2070-2 (10-79)

See EPA form T2070-2 dated 11/20/80 (TX4391) for information on the manufacturing facility for this firm.





Photographer / Witness CARROTHERS / Mc DONALD Date / Time / Direction JAN. 20, 1981 /2:30 P.M. / SE Comments: Office of Harrison Equipment Co., and Harrison Enterprises on McGOWAN ST.

2741. Cyclonite: Herahadro: 1.3.5 trinitro: 1.3.5 trinitro: pontifimethylenetrio: amino: cyclotromethylenetriotramine: L1.5 trinitro: pontification of the cyclotromethylenetriotramine: L1.5 trinitro: pontification of the cyclotro: L273. N. 17.5 p. 17.4 p. 17.5 p

Orthorhombic stryatals from actions mp 205,206° dp 182. One gram disolites in 25 ml actions stightly sol in methanol, either eithyl actiate, glassid aceto, and Practically insid in water, earthor test-actionide, carbon disolited in water, earthor test-actionide, carbon disolited in gain detonation, explosion, and balaning action see M. A. Cook, Some of High Explosions ACS Monograph no. 139 (Reinhold, New York, 1958). Caution Can name peliptitionis securics. Kapisia et al., 4rch Ensiron Health 10, 875 (1963).

Photographer / Witness

Date / Time / Direction

Comments: Merck Index description of RDX, the explosive used by Harrison Jet Guns.

Photographer / Witness

Date / Time / Direction

Comments: